



SUSMITA PATRA,784-1979-7848345-7 ⓘ
Effective from : 02-Feb-2024to 31-Dec-2024at Watania Takaful Family
Required Treatment is OutPatient
Reference No: R-000000253076185
Request Date: 05-Aug-2024 21:12:09



Eligible

Super-Restricted Network [Applicable Tariff: Super-Restricted Network]

- > Referral required **No referral required for specialist consultation**
- > Copay 20% Max 50.00 AED applicable for : Consultation / Evaluation and Management
- > Copay 20% applicable for : Laboratory, Ultrasound, X-Ray, C.T Scan, M.R.I, Radiology NEC, PET Scan, Endoscopy, Diagnostics NEC
- > Copay 20% applicable for : Acute Drugs, Chronic Drugs, Immunomodulators, Vitamins

Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Breast Cancer Screening, C.T Scan, Chronic Drugs, Diabetic Consumables, Endoscopy, Hearing Test , Immunomodulators, M.R.I, PET Scan, Physiotherapy, Pre-Op Tests, Prostate Cancer Screening ... [See More](#)
Encounter has aggregate net amount AED 700.00 or above for all other services excluding consultation requires approval.

Attachments

- Applicable procedure
- Exclusions
- Consultation / Claim Form
- Prescription Form

Ask for Authorization

Referral Document